

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

MARSHALL COUNTY REPUBLICAN CENTRAL COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM

**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. #

9130

Logged In

DM

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Bill L. Thompson  
SIGNATURE OF PERSON FILING REPORT

641-753-6647  
TELEPHONE

1/12/08  
DATE SIGNED

I AM FILING A JAN 19TH 2007 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

4844.96

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

0

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

3,922.42

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

11,323.57

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MARSHALL COUNTY REPUBLICAN CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/6/07	ID# CK# 3076	DR PHIL + NAOMIE COLINS 1318 W LINN ST MARSHALLTOWN, IA.	NA	\$ 25.00	<input checked="" type="checkbox"/>
7/26/07	ID# CK# 2138	MARIAN FLORA 803 HENRY DR MARSHALLTOWN, IA.	NA	\$25.00	<input checked="" type="checkbox"/>
8/5/07	ID# CK# 8455	MRS OR MRS BLAND 201 W. INGLEDOUE ST MARSHALLTOWN, IA.	NA	\$25.00	<input checked="" type="checkbox"/>
8/3/07	ID# CK# 1698	SANNY A THOMPSON 408 ORCHARD DR MARSHALLTOWN, IA.	NA	\$25.00	<input checked="" type="checkbox"/>
7/30/07	ID# CK# 7355	JAMES OR RACHEL PALMER 611 BOONE ST MARSHALLTOWN IA.	NA	\$100.00 <del>\$25.00</del>	<input checked="" type="checkbox"/>
7/30/07	ID# CK# 2504	J. ROBERT + MARYLYN PALMER 3051 190TH ST, MARSHALLTOWN	NA	\$100.00	<input checked="" type="checkbox"/>
7/31/07	ID# CK# 3532	KAREN SQUIRES 208 OLSON WAY MARSHALLTOWN, IA	NA	\$100.00	<input checked="" type="checkbox"/>
8/1/07	ID# CK# 3744	WILLIAM OR LANA WILSON 2904 W. LINCOLN WAY MARSHALLTOWN, IA.	NA	\$100.00	<input checked="" type="checkbox"/>
8/4/07	ID# CK# 1377	VERNE OR ELLEN HUNT 101 NEW CASTLE MARSHALLTOWN IA.	NA	\$100.00	<input checked="" type="checkbox"/>
8/2/07	ID# CK# 3916	CLAIR & HELEN LONG 2450 233RD ST MARSHALLTOWN, IA.	NA	\$100.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 700

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MLRCC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/29/07	ID# CK# 9542	TED K AMATCHUS 3305 MERRITT RD MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/24/07	ID# CK# 2988	FRED C MACDOUGALL DORRIS E DAVIS 407 E 5TH ST LISCOMB IA	NA	\$ 100	<input checked="" type="checkbox"/>
8/3/07	ID# CK# 3595	BERNETTE OR BARBARA DRYNGELSON 402 SUNSET CT MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
8/2/07	ID# CK# 3535	CHARLES + SHARON ECKLES 275 GARWIN RD MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
8/7/07	ID# CK# 2165	JACK + JOAN WETHMAN P.O. BOX 160 MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
8/6/07	ID# CK# 3241	DEBRA A HEIL 3024 OAKS AVE HAVER HILL IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/26/07	ID# CK# 5245	GHENETTE + CHARLES DAILEY 1905 WETHMAN LA MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
8/2/07	ID# CK# 2643	OAKS OR JOAN BALLARD 512 BRENTWOOD RD MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/24/07	ID# CK# 5612	JAMES F BURESH 406 ORCHARD DR MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/25/07	ID# CK# 13296	KATHRYN BURT 2860 170TH ST MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1000	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 312  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MLRCC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/5/07	ID# CK# 6483	DENNIS + JOAN ZEDNICKER 2214 EAGLEBROOK DR MARSHALLTOWN IA	NA	\$ 25.00	<input checked="" type="checkbox"/>
8/6/07	ID# CK# 6943	WARD MILLER JANET MILLER 2009 WETHMAN DR. MARSHALLTOWN IA	NA	\$12.50	<input checked="" type="checkbox"/>
8/8/07	ID# CK# 3123	ECK THELEN GOECKE 1638 200TH ST STATE CTR, IA	NA	\$25.00	<input checked="" type="checkbox"/>
8/13/07	ID# CK# 9384	GENE OR RAY BEACH 408 EDELMAN DR. MARSHALLTOWN, IA	NA	\$ 100.00	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 1717	CHRISTINE HUNT 221 LURAY RD MARSHALLTOWN IA	NA	\$125.00	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 2927	A. T. OR D. M. LUTES 3034 UNDERWOOD AVE WILMAN IA	NA	\$12.50	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 2376	WAYNE MC DONALD 1445 MARBLE RD CLEMONS IA	NA	\$12.50	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 1824	ELLIOTT OR CAROL STANLEY 2260 140TH ST AUBION, IA	NA	\$125.00	<input checked="" type="checkbox"/>
8/7/07	ID# CK# 6998	RICHARD OR BARBARA LIVINGSTON 410 ORCHARD DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
8/8/07	ID# CK# 4745	CONSTANCE + LEO HERRICK 2106 S. 12TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 437.50	
TOTAL (# last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MCACC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/8/07	ID# CK# CASH	JAY HANSEN + JAMIE BLAND W. OLIVE MARSHALLTOWN IA	NA	\$1,000	<input checked="" type="checkbox"/>
8/8/07	ID# CK# CASH	RICHARD BOLE 1719 ABBOTT AVE MARSHALLTOWN IA	NA	\$50	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 2782	MIKE + CHRISTINE RIEBENSCHNEIDER 311 2ND. ST. N.W. STATE CTR., IA.	NA	\$100	<input checked="" type="checkbox"/>
8/9/07	ID# CK# 9344	DONALD + PAT ZHORNE 2505 KNOLLWAY DR. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 2100	RICHARD + NANCY FERGUSON 2751 330TH. ST. LAUREL IA	NA	\$125.00	<input checked="" type="checkbox"/>
8/10/07	ID# CK# 3017	STEVE + PENNY HOFFMAN 701 HENRY DR. MARSHALLTOWN IA	NA	\$25.00	<input checked="" type="checkbox"/>
8/17/07	ID# CK# CASH	PETE ROGERS 403 WAQUANA RD. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
10/16/07	ID# CK# 10083	MRS + MR R.W. OTTIE 1600 W. LINCOLNWAY MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/18/07	ID# CK# 4244	MAOLYN ABERNATHY 1302 W. MAID MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/13/07	ID# CK# 11962	LARRY OR KAREN ALLEN 1508 W. LINCOLNWAY MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 800.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MCACC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/3/07	ID# CK# 8269	DOROTHY ADLAR W. OLIVE MARSHALLTOWN IA	NA.	\$ 100.00	<input checked="" type="checkbox"/>
7/16/07	ID# CK# 8894	GEORGE OR MARY BAITINGER 2304 165TH ST ALBION IA	NA	\$ 100.00	<input checked="" type="checkbox"/>
7/17/07	ID# CK# 2825	DEAN OR MARY BAKER 602 ELMWOOD DR. MARSHALLTOWN IA	NA	\$ 100.00	<input checked="" type="checkbox"/>
7/9/07	ID# CK# 14900	DONALD + RUTH BUCK 409 - 4TH ST. SW. STATE CTR. IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/18/07	ID# CK# 9677	DONALD + CYNTHIA BUTLER 903 W. SOUTHWIDE RD MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
6/24/07	ID# CK# 4057	DONALD + COOPER MARLEET FEHRLE 1722 COUNTRY CLUB DR. MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/19/07	ID# CK# 6902	RICHARD + DONNA EDDY 917 S. 8TH AVE MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/16/07	ID# CK# 1287	DONALD OR MARY GOECKE 1751 200TH ST. STATE CTR. IA.	NA	\$ 100	<input checked="" type="checkbox"/>
7/9/07	ID# CK# 1777	JOE + DIANE HUNT 2221 LURAY RD MARSHALLTOWN IA	NA	\$ 100	<input checked="" type="checkbox"/>
7/5/07	ID# CK# 5313	K.R. OR KATHRYN KAPLAN 710 W. MAIN MARSHALLTOWN IA	NA	\$ 250	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1150	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MCACC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/10/07	ID# CK# 5316	TERRY + JOAN LEEPER 1709 COUNTRY CLUB DR MARSHALLTOWN IA	NA	\$100 <sup>00</sup>	<input checked="" type="checkbox"/>
7/9/07	ID# CK# 2587	SHALA LUDKEY 2208 S. 12TH ST MARSHALLTOWN IA	NA	\$100 <sup>00</sup>	<input checked="" type="checkbox"/>
7/2/07	ID# CK# 4481	MICHAEL MILNER 1401 EMERALD DR. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/23/07	ID# CK# 6924	G WARD & JANET MILNER 2009 BETHANN DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/23/07	ID# CK# 3194	JOE + AUGUSTA PETRONE 1608 W MAIO MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/20/07	ID# CK# 8418	CHARLES + LIZENE REISSETER 1203 S 7TH AVE MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/16/07	ID# CK# 10114	MR + MRS REX RYDEN 507 HIGHLAND DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/24/07	ID# CK# 1526	KEON + PAT SCHADE 3303 S CTR ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/19/07	ID# CK# 1782	WILLIAM + MARY SCHNEDEL 902 W. MAIN ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/16/07	ID# CK# 7997	JERRY SCHILLER P.O. BOX 765 NEWTON IA	NA	\$200	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1100	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 6 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MLACC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/2/07	ID# CK# 5584	KEYLOND + CHERYL SEARLE 2904 230TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/26/07	ID# CK# 10051	WILLIAM TANK 414 N. 8TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/2/07	ID# CK# 3218	JANET + RICHARD VAUST 2903 ARDOL DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/30/07	ID# CK# 1488	LENN + BARBARA <del>WETZEL</del> 1910 STRATFORD LA, YTZEN MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/30/07	ID# CK# CASH	TOM SEAS 2323 MARSH AVE MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/30/07	ID# CK# CASH	SHERYL READOUT 411 N. 9TH ST. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
7/11/07	ID# CK# 4099	AL OR JEAN BRENNELLE 1706 HODKINS AVE CAMBON IA	NA	\$25	<input checked="" type="checkbox"/>
7/19/07	ID# CK# 3109	MARTHA HILLMAN 206 NICHOLAS DR MARSHALLTOWN IA	NA	\$25	<input checked="" type="checkbox"/>
7/9/07	ID# CK# 1647	W.H. OR CAROLYN HORN 1911 S. 320 AVE. MARSHALLTOWN IA	NA	\$25	<input checked="" type="checkbox"/>
7/5/07	ID# CK# 5817	DAN + SANDRA CROWLEY 1304 S. 12TH ST MARSHALLTOWN IA	NA	\$50	<input checked="" type="checkbox"/>
SUB-TOTAL				\$725	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 7 of 12  
(for Schedule A)



For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MCRC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/5/07	ID# CK# 2816	GARRY O. MOORE 1211 W STATE ST MARSHALLTOWN IA	NA	\$25.00	<input checked="" type="checkbox"/>
7/19/07	ID# CK# 8148	BILL OR DANA SCHERDEL 2369 MARSHALLTOWN BLVD MARSHALLTOWN IA	NA	\$25.00	<input checked="" type="checkbox"/>
6/29/07	ID# CK# 3974	JOHN A. SMITH 1566 212 NORTH 5TH ST MARSHALLTOWN IA	NA	\$25.00	<input checked="" type="checkbox"/>
6/12/07	ID# CK# 6280	JOSEPH + IRENE ARMORCHT 1841 EASTMAN AVE CLERMONT IA	NA	\$100.00	<input checked="" type="checkbox"/>
6/13/07	ID# CK# 2257	RALPH + RHODA BENDER 310 N 4TH ST MARSHALLTOWN IA	NA	\$100.00	<input checked="" type="checkbox"/>
6/13/07	ID# CK# 3927	LAYKE + DOUG BOYA 411 BRAEBURN LA. MARSHALLTOWN IA	NA	\$100.00	<input checked="" type="checkbox"/>
6/12/07	ID# CK# 6604	KEN + REBEA BRYNDELSON 911 N. CTR ST MARSHALLTOWN IA	NA	\$100.00	<input checked="" type="checkbox"/>
6/13/07	ID# CK# 3723	JOEY JANELLE CARTER 610 ELMWOOD DR. MARSHALLTOWN IA	NA	\$100.00	<input checked="" type="checkbox"/>
6/14/07	ID# CK# 1553	LUCY GROSSMAN 2015 ELMCREST DR. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/12/07	ID# CK# 6005	LEAH + HAWKINS NANCY URBANOWSKI 210 E. MAIN MARSHALLTOWN IA	NA	\$100.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 775

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 8 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MLACC

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6/11/07	ID# CK# 6803	PHYLLIS LANE 401 NEW SALSM RD MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/11/07	ID# CK# 3194	THOMAS + CINDY MACK 204 HIGHLAND ALRES RD MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/11/07	ID# CK# 7680	GREGORY + MARILBE NICHOLS 2012 WARDVIEW DR. MARSHALLTOWN IA	NA	\$125	<input checked="" type="checkbox"/>
6/11/07	ID# CK# 1520	DONALD + JEAN SEARLE 608 E. OLIVE #107 MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/17/07	ID# CK# 1233	LARRY SOUTHARD 1304 FAIRWAY DR, MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/13/07	ID# CK# 2733	LARRY OR JAYNEK RAYMON 2566 SMITH AVE MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/17/07	ID# CK# 2001	MARIEL L. WATT 808 PATTERSON LA. MARSHALLTOWN IA.	NA	\$100	<input checked="" type="checkbox"/>
5/15/07	ID# CK# 1625	DEBBY OR LARRY WILLITS 2024 200TH ST. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/15/07	ID# CK# 4135	WILLIAM + GERARDE BESTMAN 1914 KIMWOOD DR, MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/16/07	ID# CK# 3452	GREGORY + SUZANNE BROWN 707 CIRCLE DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 1025

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 9 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MLRCC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6/18/07	ID# CK# 2127	LARRY OR MARLENE ML KIBOW 1703 ROBERTSON DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/18/07	ID# CK# 12237	LORAS + KAREN NEUBOTH 303 S 12TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/18/07	ID# CK# 9545	DEANE OR JANET ADAMS 509 THUNDERBIRD DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/21/07	ID# CK# 1161	SALLY C BELKER P.O. BOX 275 MARSHALLTOWN IA	NA	\$200	<input checked="" type="checkbox"/>
6/20/07	ID# CK# 5098	RONALD, CLETTE BENGE 2607 W. MAIN ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/18/07	ID# CK# 1134	THOMAS + JEAN BOWER 512 EASTVIEW RD. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/20/07	ID# CK# 10266	JAMES OR VIKI DAVIDSON 2305 S. 12TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/21/07	ID# CK# 7875	DARRELL OR NONA EATON 1717 COUNTRY CLUB LA. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/20/07	ID# CK# 1102	WILLIAM + BETTY ETTER 626 RATCHIE DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/18/07	ID# CK# 6290	MICHAEL + BETTY KUNK 1918 W MAIN MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1100	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 10 of 12  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MCRC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6/21/07	ID# CK# 8989	JANA S LATHAM 503 TERRY TR. MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/19/07	ID# CK# 5372	CURTIS + JOAN LONEY 1814 EDEBROOK MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/19/07	ID# CK# 1813	ELLIOTT OR CAROL STANLEY 2260 140TH ST ASBORN IA	NA	\$100	<input checked="" type="checkbox"/>
6/17/07	ID# CK# 2427	NANCY A STONE 701 W. MAIN MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/21/07	ID# CK# 8709	MARY LOU TAAPPE 701 JEROME ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/18/07	ID# CK# 5006	JOE OR SUSAN WEAVER 506 CARSON MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
6/23/07	ID# CK# 2337	CAROL M WIEDENMANN 2018 EDEBROOK DR MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
4/11/07	ID# CK#	REED RISEBDAHL 1412 S 5TH ST MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
4/11/07	ID# CK#	DAKE BENEFIN 1201 S. 3RD AVE MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
4/11/07	ID# CK#	WAYNE McDONALD 1445 MARBLE RD. CLERMONT IA	NA	\$100	<input checked="" type="checkbox"/>

SUB-TOTAL

\$1000

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 11 of 12  
(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MLRC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4/1/07	ID# CK#	BILL EGRESTON 509 BRENTWOOD RD MARSHALLTOWN IA	NA	\$100	<input checked="" type="checkbox"/>
1/10/07	ID# CK#	KARL GILBERTSON 1609 RAINBOW DR CEDAR FALLS IA		\$25.00	<input type="checkbox"/>
1/10/07	ID# CK#	RON GOECKE 1751 200TH ST STATE CTR. IA		\$353.03	<input type="checkbox"/>
8-1-07	ID# CK#	BUCK BAG CASH FROM STEAK ERY		\$100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$588.03

TOTAL (if last page of this schedule)

\$10,401.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 12 of 12  
(for Schedule A)

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

MARSHALL COUNTY REPUBLICAN CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/31	ID# CK# 1133	BARB LIVINGSTON 410 ORCHARD MARSHALLTOWN IA.	MARKING BOARD <del>25000 CAR SPINOFF</del>	\$ 25.67
1/23	ID# CK# 1134	STATE CENTER ENTERPRISE ST. CTR IA.	GROUP CAMPAIGN ADD	54.00
1/30	ID# CK#	IOWA TELECOM	DEPOSIT REFUND FOR PHONES	< 2376.76 >
2/16	ID# CK# 1134	W. MAIN TIMES REPUBLICAN MARSHALLTOWN IA.	GROUP CAMPAIGN ADD	569.70
3-27	ID# CK# 1136	BARB LIVINGSTON 410 ORCHARD MARSHALLTOWN IA	CONTRACT FOR SERVICES RENDERED	1500.00
3-26	ID# CK# 1137	MARILEE NICHOLS 2012 WARVIEW MARSHALLTOWN IA	CONTRACT FOR SERVICES RENDERED	1500.00
3-26	ID# CK# 1138	US POSTMASTER	POSTAGE FOR MEETING BOX NOTICE/ RENTAL	40.00
4-11	ID# CK# 1139	BARB LIVINGSTON 410 ORCHARD MARSHALLTOWN IA	GIFT FOR OUTGOING TREASURER	25.00
SUB-TOTAL				\$ 1337.61
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons or entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Reset Form

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MCRCC

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-17	ID# CK# 1140	BRENTON INDEPENDENT IUS 11 E CHURCH MARSHALLTOWN IA	INSURANCE PACKAGE 2007	\$ 350.00
5-17	ID# CK# 1141	U.S. POST OFFICE W. LINN MARSHALLTOWN IA	STAMPS FOR NOTICES	82.00
7-5	ID# CK#	F+M BANK 11 N 1ST AVE MARSHALLTOWN IA	CHARGE BACK OF CHECK	100.00
8-17	ID# CK#	F+M BANK 11 N 1ST AVE MARSHALLTOWN IA	CHARGE BACK FEES	7.88
9-6	ID# CK# 1142	BILL EGLESTON 509 BRENTWOOD RD MARSHALLTOWN, IA	FOOD, DRINK, PLATES SILVERWARE FOR STEAK FRY	1801.97
9-6	ID# CK# 1143	MARSHALL CO. CATTLEMEN	FEE FOR COOKING AT STEAK FRY	100.00
9-18	ID# CK# 1144	BARBLIVINGSTON 410 BRCHARD MARSHALLTOWN IA	<del>COSTLY</del> <del>FOR</del> FLIGHT OCTOBERFEST PARADE	30.00
9-18	ID# CK# 1145	MARSHALL CO. SHERIFF MARSHALLTOWN IA	RENTAL OF GROUNDS FOR STEAK FRY	100.00
SUB-TOTAL				\$ 2571.85
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MCRCC

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-16	ID# CK# 1144	U.S. POSTAL SERVICE MARSHALLTOWN IA	POSTAGE FOR MEETING NOTICE	\$ 82.00
11-21	ID# CK#	F&M BANK 11 N 1ST AVE. MARSHALLTOWN IA	REFUND OF CHARGE BACK FEE	< 7.88 >
10-16	ID# CK# 1147	BARB LIVINGSTON 410 ORCHARD MARSHALLTOWN IA	CANDY FOR OCTOBER FEST PARADE	48.04
12-31	ID# CK# 1148	BARB LIVINGSTON 410 ORCHARD MARSHALLTOWN IA	POSTAGE FOR CAUCUS POSTCARDS	58.80
8-1	ID# CK# CASH	BAT ADGAR W. OLIVE MARSHALLTOWN IA	SALE OF LEFTOVER STEAKS AT STEAK FRY	< 68.00 >
	ID# CK#	F&M BANK 11 N 1ST AVE MARSHALLTOWN IA	REDEPOSIT OF CHARGE BACK	< 100.00 >
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 12.96
TOTAL (if last page of this schedule)				\$ 3,922.42

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 3 of 3

(for Schedule B)